Current as of: April 9, 1999

## **Dear APPLICANT:**

This is an application package for EPA financial assistance programs. A PDF read-only version and a Wordperfect version may be found on the EPA Region 4 Grants Management Office Homepage, which may be accessed at:

http://www.epa.gov/region4/grantpgs/grants.htm

If you have problems accessing our web site, please contact Harriet Yancey at 404-562-8408.

If you have questions about the assistance program for which you are applying or need help in completing your application, please contact the Grants Management Office at 404/562-8400 or one of the following Grants Specialists at 404/562-xxxx:

Hector Buitrago - 8397	Jean Milner - 8422
Elaine Curles - 8364	Ethelreen Murdix - 8426
Marlene Jackson - 8415	Ralph Robinson - 8418
Jane Kauffmann - 8427	Ken Turner - 8428
Stephanie Lankford - 8423	

Applications should be submitted at least sixty (60) days prior to the expected date of award. Your completed original application and one copy should be mailed to:

GRANTS MANAGEMENT OFFICE ENVIRONMENTAL PROTECTION AGENCY ATLANTA FEDERAL CENTER 61 FORSYTH STREET ATLANTA, GA 30303-8960

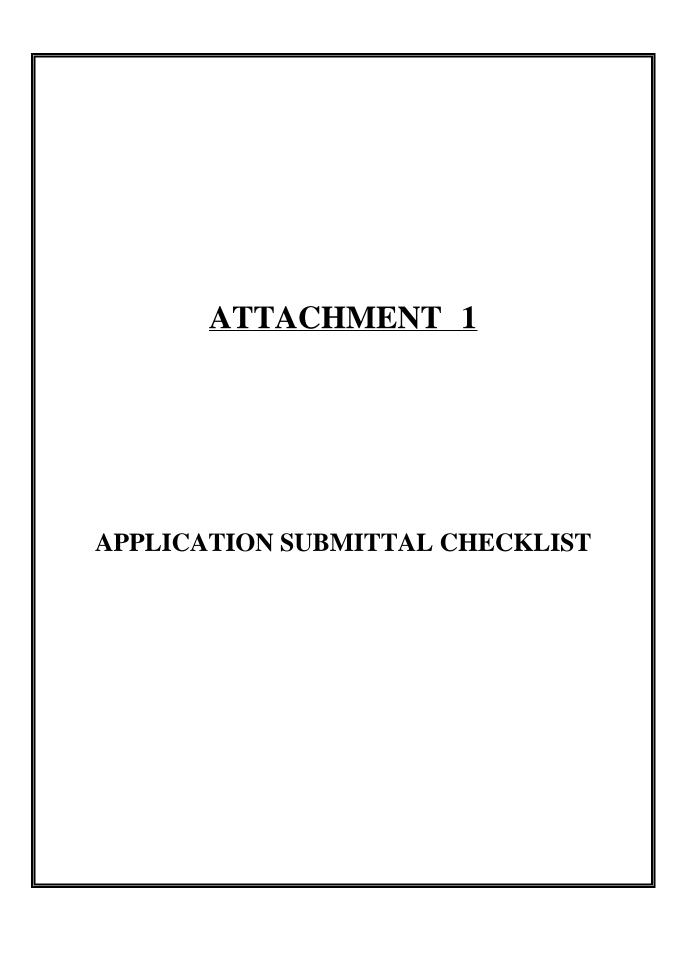
# **APPLICATION KIT CONTENTS**

## **ATTACHMENTS**

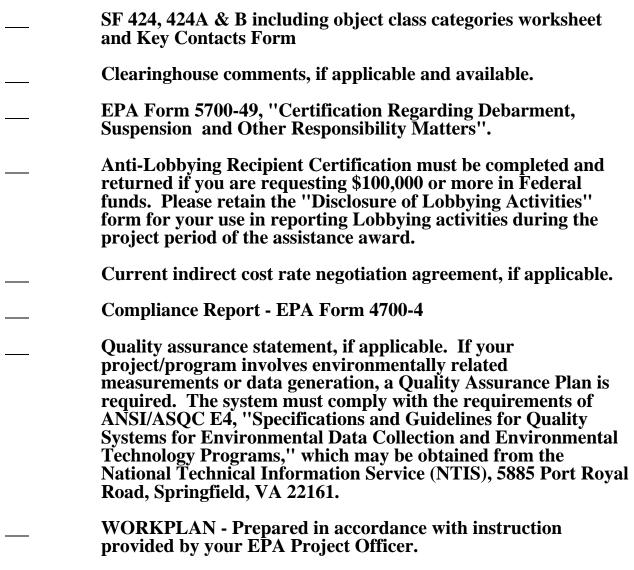
- 1. Application Submittal Checklist
- 2. SF 424, 424A, 424B Application Form
- 3. Supplemental General Instructions and Budget Worksheets
- 4. Quality Assurance Statement
- 5. Certification Regarding Debarment and Suspension
- 6. Lobbying Certification and Disclosure Forms
- 7. Compliance Report
- 8. [ RESERVED ]
- 9. Disadvantaged Business Utilization Report (MBE/WBE)
- 10. Regulations and OMB Circulars
- 11. Superfund Specific Requirements

Note: Many of the OMB Standard Forms may also be accessed through their web site:

http://www.whitehouse.gov/WH/EOP/OMB/Grants/



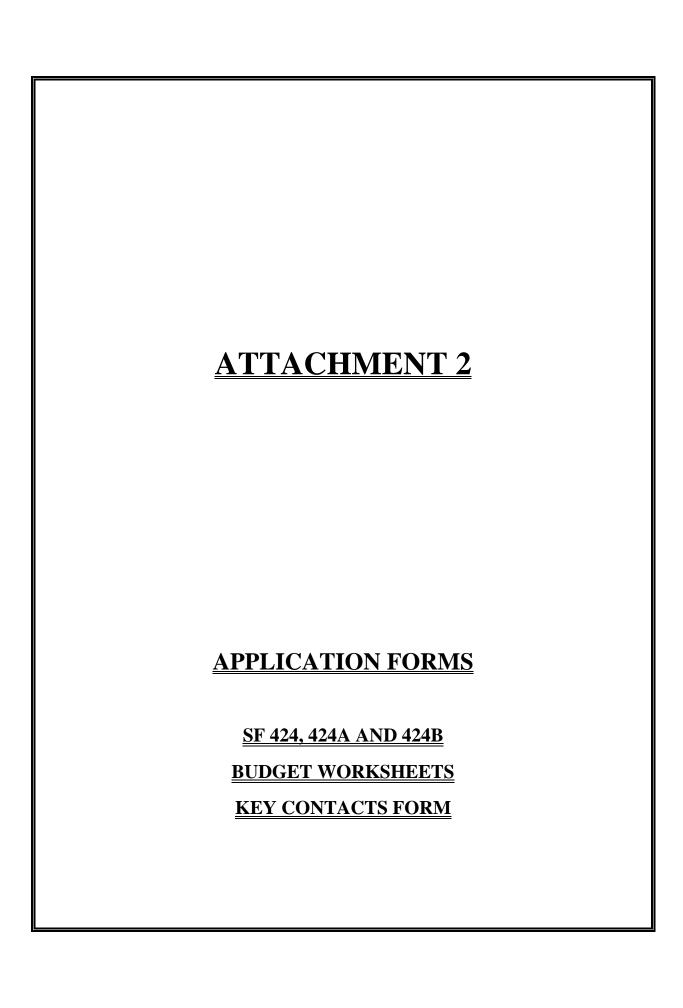
## APPLICATION PACKAGE SUBMITTAL CHECKLIST



**Superfund Specific Requirements** 

MAIL THE ORIGINAL AND ONE COPY OF YOUR COMPLETED APPLICATION TO:

GRANTS MANAGEMENT OFFICE ENVIRONMENTAL PROTECTION AGENCY ATLANTA FEDERAL CENTER 61 FORSYTH STREET ATLANTA, GA 30303-8960



APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED	Applicant Identifier
1. TYPE OF SUBMISSION		3. DATE RECEIVED BY STATE	State Application Identifier
Application G Construction G Non-Construction	Preapplication G Construction G Non-Construction	4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier
5 ADDI ICANT INFORMATION			
5. APPLICANT INFORMATION Legal Name:		Organizational Unit:	
Address (give city, county, state, and zip	o code):	Name and telephone number of	the person to be contacted on matters involving
, real see (give only, seeinly, seele, and 24	. 3030).	this application (give area code)	and possess to be considered on make on moning
6. EMPLOYER IDENTIFICATION (EIN	l):		NT: (enter appropriate letter here)
			H. Independent School District
			State Controlled Institution of Higher Learning     Private University
8. TYPE OF APPLICATION:		•	K. Indian Tribe
G New G Continuation	on G Revision	· ·	L. Individual
		F. Intermunicipal	M. Profit Organization
If Revision, enter appropriate letter(s	) in box(es):	G. Special District	N. Other (Specify):
	Decrease Award     Decrease Duration	9. NAME OF FEDERAL AGEN	NCY:
TITLE:  12. AREAS AFFECTED BY PROJECT	Γ (cities, counties, states, etc.):		
13. PROPOSED PROJECT:	14. CONGRESSIONAL DISTRICT OF:		
Start Date End Date	a. Applicant:		b. Project
15. Estimated Funding:			JBJECT TO REVIEW BY STATE EXECUTIVE
a. Federal	\$	ORDER 12372 PROCESS?	
b. Applicant	\$	a. YES. THIS PREAPPLICAT TO THE STATE EXE REVIEW ON:	ION/APPLICATION WAS MADE AVAILABLE CUTIVE ORDER 12372 PROCESSES FOR
c. State	\$		
d. Local	\$		OT COVERED BY E.O. 12372
e. Other	\$	G OR PROGRAM H REVIEW	AS NOT BEEN SELECTED BY STATE FOR
f. Program Income	\$	1	NQUENT ON ANY FEDERAL DEBT?
g. TOTAL	\$ GE AND BELIEF, ALL DATA IN T	G YES If "Yes" attach ar	•
DOCUMENT HAS BEEN DULY AUT ATTACHED ASSURANCES IF THE	HORIZED BY THE GOVERNING E ASSISTANCE IS AWARDED.	BODY OF THE APPLICANT AND	ATION ARE TRUE AND CORRECT, THE THE APPLICANT WILL COMPLY WITH THE
a. Typed Name of Authorized Represer		b. Title:	c. Telephone Number
d. Signature of Authorized Representat	ve	•	e. Date Signed

		BUDGET INFO	ORMATION - Non-Cons	truction Programs		OMB Approval No. 0348-0044
		:	SECTION A - BUDGET SUM	MARY		
Grant Program Function	Catalog of Federal Domestic	Estimated U	Inobligated Funds		New or Revised Budge	t
or Activity (a)	Assistance Number (b)	Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1.		\$	\$	\$	\$	\$
2.						
3.						
4.						
5. TOTALS		\$	\$	\$	\$	\$
		S	ECTION B - BUDGET CATEG	ORIES		
6. OBJECT CLASS	CATEGORIES		GRANT PROGRAM	, FUNCTION OR ACTIVITY		Total
		(1)	(2)	(3)	(4)	(5)
a. Personnel		\$	\$	\$	\$	\$
b. Fringe Benefits	3					
c. Travel						
d. Equipment						
e. Supplies						
f. Contractual						
g. Construction						
h. Other						
i. Total Direct Cha	arges (sum of 6a-h)					
j. Indirect Charge	S					
k. TOTALS (sum	of 6i and 6j)	\$	\$	\$	\$	\$
	-/-					
7. Program Income		\$	\$	\$	\$	\$

SECTION C - NON-FEDERAL RESOURCES					
(a) Grant Program		(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8.		\$	\$	\$	\$
9.					
10.					
11.					
12. TOTAL (sum of lines 8 and 11)		\$	\$	\$	\$
	SECTIO	N D - FORECASTED C	ASH NEEDS		
13. Federal	(Total for 1stYear)	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
	\$	\$	\$	\$	\$
14. Non-Federal					
15. TOTAL (sum of lines 13 and 14)	\$	\$	\$	\$	\$
SECTION E - B	UDGET ESTIMATES C	OF FEDERAL FUNDS N	EEDED FOR BALANCE	OF THE PROJECT	
			FUTURE FUNDING	PERIODS (Years)	
(a) Grant Program		(b) First	(c) Second	(d) Third	(e) Fourth
16.		\$	\$	\$	\$
17					
18.					
19.					
20. TOTALS (sum of lines 16 - 19)		\$	\$	\$	\$
	SECTION	I F - OTHER BUDGET I	NFORMATION		
21. Direct Charges:			22. Indirect Charges:		
23. Remarks:					

#### **INSTRUCTIONS FOR THE SF 424**

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form used by applicants as a required facesheet for preapplications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

Item: Entry: Item: Entry: 12. List only the largest political entities affected (e.g., 1. Self-explanatory. State counties, cities). 2. Date application submitted to Federal agency (or State if applicable) & applicant's control number (if 13. Self explanatory. applicable). 14. List the applicant's Congressional District and any State use only (if applicable). District(s) affected by the program or project. 3. 4. If this application is to continue or revise an existing 15. Amount requested or to be contributed during the first award, enter present Federal identifier number. If for a funding/budget period by each contributor. Value of inkind contributions should be included on appropriate new project, leave blank. lines as applicable. If the action will result in a dollar 5. Legal name of applicant, name of primary change to an existing award, indicate only the amount organizational unit which will undertake the assistance of the change. For decreases, enclose the amounts in activity, complete address of the applicant, and name parentheses. If both basic and supplemental amounts and telephone number of the person to contact on are included, show breakdown on an attached sheet. matters related to this application. For multiple program funding, use totals and show breakdown using same categories as item 15. 6. Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service. Applicants should contact the State Single Point of 16. Contact (SPOC) for Federal Executive Order 12372 to 7. Enter the appropriate letter in the space provided. determine whether the application is subject to the State intergovernmental review process. 8. Check appropriate box and enter appropriate letter(s) in the space(s) provided: 17. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit "New" means a new assistance award. "Continuation" means an extension for an disallowances, loans and taxes. additional funding/budget period for a project with a projected completion date. 18. To be signed by the authorized representative of the "Revision" means any change in the Federal applicant. A copy of the governing body's authorization Government's financial obligation or contingent for you to sign this application as official representative liability from an existing obligation. must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be 9. Name of Federal agency from which assistance is submitted as part of the application.) being requested with this application.

10.

11.

Use the Catalog of Federal Domestic Assistance number and title of the program under which

Enter a brief descriptive title of the project. If more

than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this

assistance is requested.

project.

### **INSTRUCTIONS FOR THE SF-424A**

Public reporting burden for this collection of information is estimated to average 180 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collections of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0044), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

#### **General Instructions**

This form is designed so that application can be made for funds from one or more grant programs. In preparing the budget, adhere to any existing Federal grantor agency guidelines which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program. For some programs, grantor agencies may require budgets to be separately shown by function or activity. For other programs, grantor agencies may require a breakdown by function or activity. Sections A. B. C. and D should include budget estimates for the whole project except when applying for assistance which required Federal authorization in annual or other funding period increments. In the latter case, Section A, B, C, and D should provide the budget for the first budget period (usually a year) and Section E should present the need for Federal assistance in the subsequent budget periods. All applications should contain a breakdown by the object class categories show in Lines a - k of Section B.

# Section A. Budget Summary Lines 1 - 4, Columns (a) and (b)

For applications pertaining to a *single* federal grant program (Federal Domestic Assistance Catalog number) and *not requiring* a functional or activity breakdown, enter on Line 1 under Column (a) the catalog program title and the catalog number in Column (b).

For applications pertaining to a *single* program *requiring* budget amounts by multiple functions or activities, enter the name of each activity or function on each line in Column (a), and enter the catalog number in Column (b). For applications pertaining to multiple programs where none of the programs require a breakdown by function or activity, enter the catalog program title on each line in Column (a) and the respective catalog number on each line in Column (b).

For applications pertaining to *multiple* programs where one or more programs require a breakdown by function or activity, prepare a separate sheet for each program requiring the breakdown. Additional sheets should be used when one form does not provide adequate space for all breakdown of data required. However, when more than one sheet is used, the first page should provide the summary totals by programs.

#### Lines 1 - 4, Columns (c) through (g).

For *new* applications, leave Columns (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year).

For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the Federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of amounts in Columns (e) and (f).

For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of Federal funds and enter in Column (f) the amount of the increase or decrease of non-Federal funds. In Column (g) enter the new total budgeted amount (Federal and non-Federal) which includes the total previous authorized budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of amounts in Columns (e) and (f).

Line 5 - Show the totals for all columns used.

#### Section B. Budget Categories

In the column headings (1) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1 - 4, Column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each program, function, or activity, fill in the total requirements for funds (both Federal and non-Federal) by object class categories.

**Lines 6a-i -** Show the totals of Lines 6 a to 6h in each column.

Line 6j - Show the amount of indirect cost.

Line 6k - Enter the total of amounts on Lines 6i and 6j. For all applications for new grants and continuation grants the total amount in column (5), Line 6k, should be the same as the total shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5.

## **INSTRUCTIONS FOR THE SF-424A** (continued)

**Line 7 -** Enter the estimated amount of income, if any, expected to be generated from this project. Do not add or subtract this amount from the total project amount. Show under the program narrative statement the nature and source of income. The estimated amount of program income may be considered by the federal grantor agency in determining the total amount of the grant.

#### Section C. Non-Federal-Resources

**Lines 8-11 -** Enter amounts of non-Federal resources that will be used on the grant. If in-kind contributions are included, provide a brief explanation on a separate sheet.

**Column (a) -** Enter the program titles identical to Column (a), Section A. A breakdown by function or activity is not necessary.

**Column (b)** - Enter the contribution to be made by the applicant.

**Column (c)** - Enter the amount of the State's cash and in-kind contribution if the applicant is not a State or State agency. Applicants which are a State or State agency should leave this column blank.

**Column (d)** - Enter the amount of cash and in-kind contributions to be made from all other sources.

Column (e) - Enter totals of Columns (b), (c), and (d).

**Line 12 -** Enter the total for each of Columns (b)-(e). The amount in Column (e) should be equal to the amount on Line 5, Column (f), Section A.

#### Section D. Forecasted Cash Needs

**Line 13 -** Enter the amount of cash needed by quarter from the grantor agency during the first year.

**Line 14 -** Enter the amount of cash from all other sources needed by quarter during the first year.

Line 15 - Enter the totals of amounts on Lines 13 and 14.

# Section E. Budget Estimates of Federal Funds Needed for Balance of the Project

Lines 16-19 - Enter in Column (a) the same grant program titles shown in Column (a), Section A. A breakdown by function or activity is not necessary. For new applications and continuation grant applications, enter in the proper columns amounts of Federal funds which will be needed to complete the program or project over the succeeding funding periods (usually in years). This section need not be completed for revisions (amendments, changes, or supplements) to funds for the current year.

If more than four lines are needed to list the program titles, submit additional schedules as necessary.

**Line 20 -** Enter the total for each of the Columns (b)-(e). When additional schedules are prepared for this Section, annotate accordingly and show the overall totals on this line.

#### Section F. Other Budget Information

**Line 21 -** Use this space to explain amounts for individual direct object-class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.

**Line 22 -** Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

**Line 23 -** Provide any other explanations or comments deemed necessary.

#### ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

**Note:** Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

#### As the duly authorized representative of the applicant, I certify that the applicant:

- Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of the project costs) to ensure proper planning, management and completion of the project described in this application.
- Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
- Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§ 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
- 6. Will comply with all Federal statues relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 795), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107), which prohibits discrimination on the basis of age;

- (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination of the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§ 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. § 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
- 7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
- Will comply with the provision of the Hatch Act (5 U.S.C. §§ 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§ 276a-7), the Copeland Act (40 U.S.C. §§ 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§ 327-333), regarding labor standards for federally assisted construction subagreements.

Previous Edition Usable

- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuance to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplain in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S. C. §§ 1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. § 7401 et sea.); (a) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§ 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

- Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.)
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
- 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
- 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
APPLICANT ORGANIZATION	DATE SUBMITTED

## APPLICATION FOR FEDERAL ASSISTANCE

The following application forms prescribed by Office of Management and Budget's (OMB) grants management circular A-102 may be obtained via Internet (PDF read-only format) at:

http://www.whitehouse.gov/WH/EOP/OMB/Grants/

STANDARD FORM 424 (REV 7-97) - Application for Federal Assistance

STANDARD FORM 424A (REV 7-97) - Budget Information (Non-construction Programs)

STANDARD FORM 424B (REV 7-97) - Assurances (Non-construction Programs)

**STANDARD FORM 424C (REV 7-97) - Budget Information (Construction Programs)** 

STANDARD FORM 424D (REV 7-97) - Assurances (Construction Programs)

## **OBJECT CLASS CATEGORIES WORKSHEET**

[NOTE: Please indicate any pre-award costs with a star (\*).]

POSITION	NUMBER	SALARY	WORK YEARS	AMOUNT	
			]		
			† †		
			+		
		-	+ +		1
	-		+ +		
			+		
		-	+ +		
		-	+		-
a. PERSONNEL TOTAL					
					_
b. FRINGE BENEFITS					
BASE					
RATE	X				
b. FRINGE BENEFITS TOTAL					
c. TRAVEL					
Explain:					
					_

## **OBJECT CLASS CATEGORIES WORKSHEET**

d. EQUIPMENT: Tangible, non-expendable, personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. Applicant's definition of equipment may be used provided the definition at least includes all items previously defined above.

ITEM	NUMBER	COST PER UNIT	TOTAL
d. EQUIPMENT TOTAL:			

## e. SUPPLIES

List supplies by groups, as appropriate:	
e. SUPPLIES	

# **OBJECT CLASS CATEGORIES WORKSHEET**

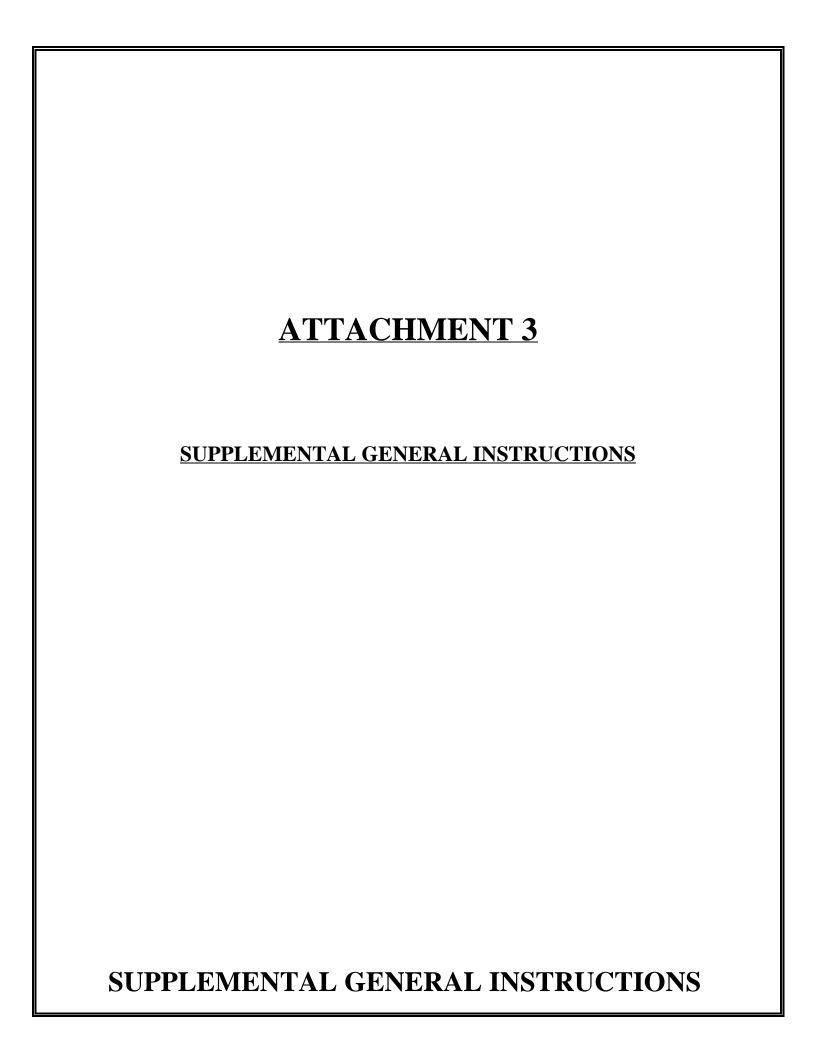
f. CONTR	ACTUAL			
L. Fe	ist each planned contract or type of service to lederal) should be listed under category h. OTI	be procured. Agreem HER.	nents/contracts with other governm	nental agencies (state, local or
$\vdash$				
f	CONTRACTUAL TOTAL			
				<u> </u>
	RUCTION (N/A)			
h. OTHER				
Other: Ex	plain by major categories.			
	A DIDLOT GOOTS			
	L DIRECT COSTS:	(DATE	0()	
	ECT COSTS:	(RATE:	%)	
	L PROPOSED COSTS:			
FEDERA	AL FUNDS REQUESTED:			
DECIDII	<sup>70</sup> ENT SHARE OF TOTAL PROPO	OSED COSTS.		
KECH II	%	OSED COSTS.		

# **KEY CONTACTS**

## AGENCY/ORGANIZATION DIRECTOR

(Individual who is authorized to sign the assistance agreement application and award acceptance.)

NAME:	
TITLE:	
ADDRESS:	
TELEPHONE:	EMAIL
	PROGRAM/PROJECT DIRECTOR
(Technical program application.)	director or person responsible for the project as a contact person in Block #5 of the
NAME:	
TITLE:	
ADDRESS:	
TELEPHONE:	EMAIL
	FINANCE DIRECTOR
(Individual responsi expenditures, prepa	ble for maintaining the accounting and financial management system supporting ring the financial reports, etc.)
NAME:	
TITLE:	
ADDRESS:	
TELEPHONE:	EMAIL_



# FOR APPLICATION FORMS SF 424A and B

Note:

Please refer to the instructions for SF-424 on the SF-424 form. Those items not discussed below are considered self- explanatory or adequately covered by the form instructions.

# **FACE SHEET - SF424**

#### **ITEM**

- 7. If a non-profit organization, please indicate your IRS classification. 501(c)(4) organizations which lobby are not eligible for Federal financial assistance.
- 9. Please insert the name, if applicable, of the EPA person(s) from whom you have received pre-application assistance. This ensures your application will go to the appropriate EPA program office for review.
- 10. Insert the Catalogue of Federal Domestic Assistance number and title if known. See enclosed list of catalog numbers and titles.
- 11. A BRIEF description of the project or program. A detailed description is included in the workplan or project narrative.
- 13. The proposed project period should reflect the amount of time that will be required to complete the ENTIRE scope of work.
- 14.a. Enter Congressional district numbers where office is located.
  - b. Enter district(s) affected by the program/project. If every district in State, enter "Statewide."
- 16. The Intergovernmental Review process is necessary and can delay funding of your application until completed. You should start this process as early as possible but not later than 60 days prior to anticipated award. Contact your State Clearinghouse to determine if an application review is required. You must submit to EPA either a written statement that a review of the application is not required or the Clearinghouse must provide EPA with comments on the application. This review process may take as long as 60 days. See enclosed list of State Points of Contact or alternate instructions. *Tribes are encouraged to comply with the process, but it is not mandatory*.
- 18. The application *must* be signed by the person or entity who has authority to commit the applicant to performance and compliance with the assurances stated in SF 424B and to execute the assistance agreement on behalf of the applicant.

# **SF-424A - BUDGET INFORMATION**

## **SECTION A**

COLUMNS a, b, c and d- Not required.

COLUMNS e, f, and g - Required

## **SECTION B** - Required

Enter the COMBINED Federal and non-Federal funds distributed by object class categories. The total should be the same as that shown on the face sheet (SF 424). "BUDGET CATEGORIES INFORMATION" worksheets are provided for assistance in preparing a detailed budget and the figures entered in 6.a. through 6.k. should come from these sheets. These sheets should be included in your application submittal.

## **SECTION C**

Show Sources of Non-Federal Funds. See General Instructions, Item 15.

## **SECTION D and E** - Not required.

## **SECTION F**

Line 21 - Enter "See BUDGET CATEGORIES INFORMATION worksheets."

Line 22 - Enter indirect cost rate and indirect charges.

## **SF 424B**

## **ASSURANCES - NON-CONSTRUCTION PROGRAMS**

Please read the assurances carefully before signing. The required assurances *must* be signed by the official who signed the SF 424 FACE-SHEET.

## GRANT PROGRAMS ADMINISTERED BY EPA

(Refer to Item #10 of the "Supplemental General Instructions for Application Forms SF424A and B".)

The **Catalog of Federal Domestic Assistance** is a government-wide compendium of Federal programs, projects, services, and activities which provide assistance or benefits to the American public. The CFDA contains financial and nonfinancial assistance programs administered by departments and establishments of the Federal government.

For a listing of the assistance programs administered by EPA as contained in the CFDA, please refer to the following web site:

http://www.epa.gov/ogd/cfda.htm

## INTERGOVERNMENTAL REVIEW PROCESS STATE POINTS OF CONTACT

(Refer to Item #16 of the "Supplemental General Instructions for Application Forms SF424A and B".)

## **ALABAMA**

#### **BACKGROUND:**

Executive Order 12372 and EPA's implementing regulations - 40 CFR Part 29, 40 CFR 30.12(c), and 40 CFR 31.11 - require that all interested state, areawide, regional, and local agencies be given the opportunity to review and to comment on proposed Federal assistance within their area(s) of jurisdiction or influence. The regulations also provide for implementation of the requirements of Section 204 of the Demonstration Cities and Metropolitan Development Act of 1966, as amended, which apply to all Federal assistance.

EPA cannot award assistance until all interested parties (e.g., State agencies, Planning and Economic Development agencies) have been given the opportunity to review the proposed project and all concerns of these agencies about the proposed project have been satisfactorily disposed of by the applicant.

A copy of your application should be submitted to the appropriate agency(ies) listed below for comment at least 60 days before sending your application to EPA. It is not necessary to send an application to all Development Districts and agencies listed but only to those agencies responsible for the area(s) affected or that may be affected by your proposed project. Please include with your application to EPA a copy of all comments received and, if required, an explanation of action taken to accommodate any concerns of the designated agencies.

#### **PROCEDURES:**

Applicants for projects in Alabama having *state-wide impact* should submit a copy of their applications to the CENTRAL ALABAMA REGIONAL PLANNING AND DEVELOPMENT COMMISSION (REGION 9) on the list below. They are serving as the State Intergovernmental Review Clearinghouse for these projects. For projects having local impact, applications should be sent to the appropriate Regional Development Commission listed below.

REGION 1 NORTHWEST ALABAMA COUNCIL OF LOCAL GOVERNMENTS Mr. Sam Minor, Executive Director P.O. Box 2603 103 Student Drive Muscle Shoals AL 35662

205/389-0500 FAX 205/389-0599

REGION 2
WEST ALABAMA PLANNING AND DEVELOPMENT COUNCIL
Mr. Robert B. Lake, Executive Director
4200 Highway 69 North, Suite 1
Northport
AL 35473

205/333-2990 FAX 205/333-2713

REGION 3
BIRMINGHAM REGIONAL PLANNING COMMISSION
Mr. Larry W. Watts, Executive Director
2112 Flavorth Avenue South

2112 Eleventh Avenue, South Magnolia Office Park, Suite 220 Birmingham

AL 36256

202/251-8139 FAX 205/328-3304

**REGION 4** 

EAST ALABAMA REGIONAL PLANNING AND DEVELOPMENT COMMISSION

Mr. Bill Curtis, Executive Director

P.O. Box 2186

1130 Quintard Avenue, Suite 300

Anniston

**AL 36202** 

205/237-6741

FAX 205/237-6763

**REGION 5** 

SOUTH CENTRAL ALABAMA DEVELOPMENT COMMISSION

**Tyson Howard, Executive Director** 

5900 Carmichael Place

Montgomery

**AL 36117** 

334/244-6903

FAX 334-270-0038

**REGION 6** 

ALABAMA-TOMBIGBEE REGIONAL COMMISSION

Mr. John C. Riggs, Executive Director

107 Broad Street

Camden

AL 36726

334/682-4234 FAX 334/682-4205

**REGION 7** 

SOUTHEAST ALABAMA REGIONAL PLANNING & DEVELOPMENT COMMISSION

Mr. W. Fred Dykes, Executive Director

P.O. Box 1406

**462 North Oates Street** 

Dothan

Alabama 36302

334/794-4093 FAX 334/794-3288

**REGION 8** 

SOUTH ALABAMA REGIONAL PLANNING COMMISSION

Mr. Russ Wimberly, Executive Director

P.O. Box 1665

**651 Church Street** 

Mobile

**AL 36633** 

334/433-6542

FAX 334/433-6009

REGION 9
CENTRAL ALABAMA REGIONAL PLANNING & DEVELOPMENT COMMISSION
Ms. Ann B. Harper, Executive Director
125 Washington Avenue, 3<sup>rd</sup> Floor
Montgomery
AL 36104

334/262-4300 FAX 334/262-6976

REGION 10 LEE-RUSSELL COUNCIL OF GOVERNMENTS Ms. Suzanne G. Burnette, Executive Director 2207 Gateway Drive Opelika AL 36801

334/749-5264 FAX 334/749-6582

REGION 11 NORTH CENTRAL ALABAMA REGIONAL COUNCIL OF GOVERNMENTS Mr. C. Ronald Matthews, Executive Director 216 Jackson Street, SE P.O. Box C Decatur AL 35602

205/355-4515 FAX 205/351-1380

REGION 12 TOP OF ALABAMA REGIONAL COUNCIL OF GOVERNMENTS Mr. Bob Culver, Executive Director 115 Washington Street, SE Huntsville AL 35801

205/533-3330 FAX 205/533-3442

### **FLORIDA**

Ms. Cherie L. Trainor, Coordinator Florida State Clearinghouse Department of Community Affairs 2555 Shumard Oak Boulevard Tallahassee, FL 32399-2100

850/922-5438

### **GEORGIA**

Mr. Charles H. Badger, Administrator Georgia State Clearinghouse Office of Planning and Budget 270 Washington Street, SW Atlanta, GA 30334

404/656-3855

## **KENTUCKY**

Mr. Ronald W. Cook, Manager Kentucky State Clearinghouse 2nd Floor, Capital Plaza Tower Frankfort, KY 40601

502/573-2382

### **MISSISSIPPI**

Ms. Cathy Mallette, Clearinghouse Officer Office of Federal Grant Management and Reporting Department of Finance and Administration 303 Walter Schillers Building 550 High Street Jackson, MS 39201

601/949-2174

## **NORTH CAROLINA**

Ms. Chrys Baggett State Clearinghouse Department of Administration 116 West Jones Street Raleigh, NC 27603-8003

919/733-7232

### SOUTH CAROLINA

Ms. Omeagia Burgess Intergovernmental Review Office of the Governor 1205 Pendleton Street, Room 477 Columbia, SC 27201

803/734-0494

### **TENNESSEE**

#### **BACKGROUND:**

Executive Order 12372 and EPA's implementing regulations - 40 CFR Part 29, 40 CFR 30.12(c), and 40 CFR 31.11 - require that all interested state, areawide, regional, and local agencies be given the opportunity to review and to comment on proposed Federal assistance within their area(s) of jurisdiction or influence. The regulations also provide for implementation of the requirements of Section 204 of the Demonstration Cities and Metropolitan Development Act of 1966, as amended, which apply to all Federal assistance.

EPA cannot award assistance until all interested parties (e.g., State agencies, Planning and Economic Development agencies) have been given the opportunity to review the proposed project and all concerns of these agencies about the proposed project have been satisfactorily disposed of by the applicant.

Since the State of Tennessee currently has no Single Point of Contact for Intergovernmental Review, a copy of your application should be submitted to the appropriate agency(ies) listed below for comment at least 60 days before sending your application to EPA. It is not necessary to send an application to all Development Districts and agencies listed but should be sent only to those agencies responsible for the area(s) affected or that may be affected by your proposed project. Please include with your application to EPA a copy of all comments received and, if required, an explanation of action taken to accommodate any concerns of the designated agencies.

#### **PROCEDURES:**

Therefore, applicants for projects in Tennessee should submit a copy of their applications to each of the appropriate State Agency Grant Review Contacts.

Mr. James Morris Department of Economic and Community Development Local Planning Division 6th Floor, Rachel Jackson Building Nashville, TN 37243

Mr. Jack Hughes Department of Environment and Conservation 401 Church Street L & C Tower Nashville, TN 37243

Mr. N.E. Christianson Department of Transportation 6th Floor, James K. Polk Building Nashville, TN 37243

Mr. Joe Garrison Tennessee Historical Commission 2941 Lebanon Road Nashville, TN 37243-0442

Mr. Dan Sherry Tennessee Wildlife Resources Agency P.O. Box 40747 Nashville, TN 37204

Applicants should also send a copy to the appropriate Tennessee Development District listed below:

NORTHWEST TENNESSEE Mr. Robert Brandon, Executive Director P.O. Box 963 124 Weldon Street Martin, TN 38237

901/587-4215

GREATER NASHVILLE REGIONAL COUNCIL Mr. Maynard Pate, Executive Director 700 Stahlman Building 211 Union Street, Box 233 Nashville, TN 37201

615/862-8828

UPPER CUMBERLAND Mr. Ed Brooks, Executive Director 1225 Burgess Falls Road Cookeville, TN 38501

615/432-4111

FIRST TENNESSEE Ms. Susan Roberts Reid, Executive Director 207 North Boone Street, Suite 800 Johnson City, TN 37604

615/928-0224

MEMPHIS AREA ASSOCIATION OF GOVERNMENTS Mr. John Sicola, Executive Director 157 Poplar Avenue, B150 Memphis, TN 38103

901/576-4610

SOUTHWEST TENNESSEE Mr. Barry Matthews, Executive Director Williamsburg Office Park 27 Conrad Drive, Suite 150 Jackson, TN 38301

901/668-7112

SOUTH CENTRAL TENNESSEE Mr. Joe M. Williams, Executive Director 815 South Main P.O. Box 1346 Columbia, TN 38401

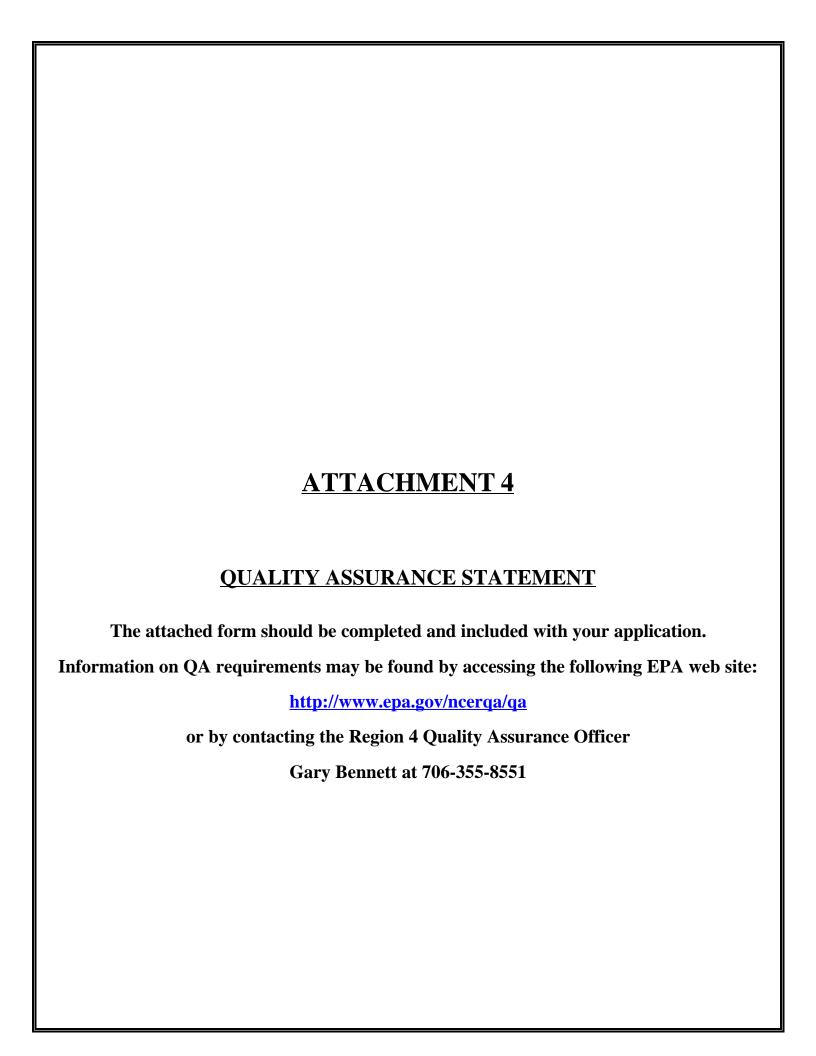
615/381-2040

SOUTHEAST TENNESSEE Mr. Joe Guthrie, Executive Director 25 Cherokee Boulevard P.O. Box 4757 Chattanooga, TN 37405

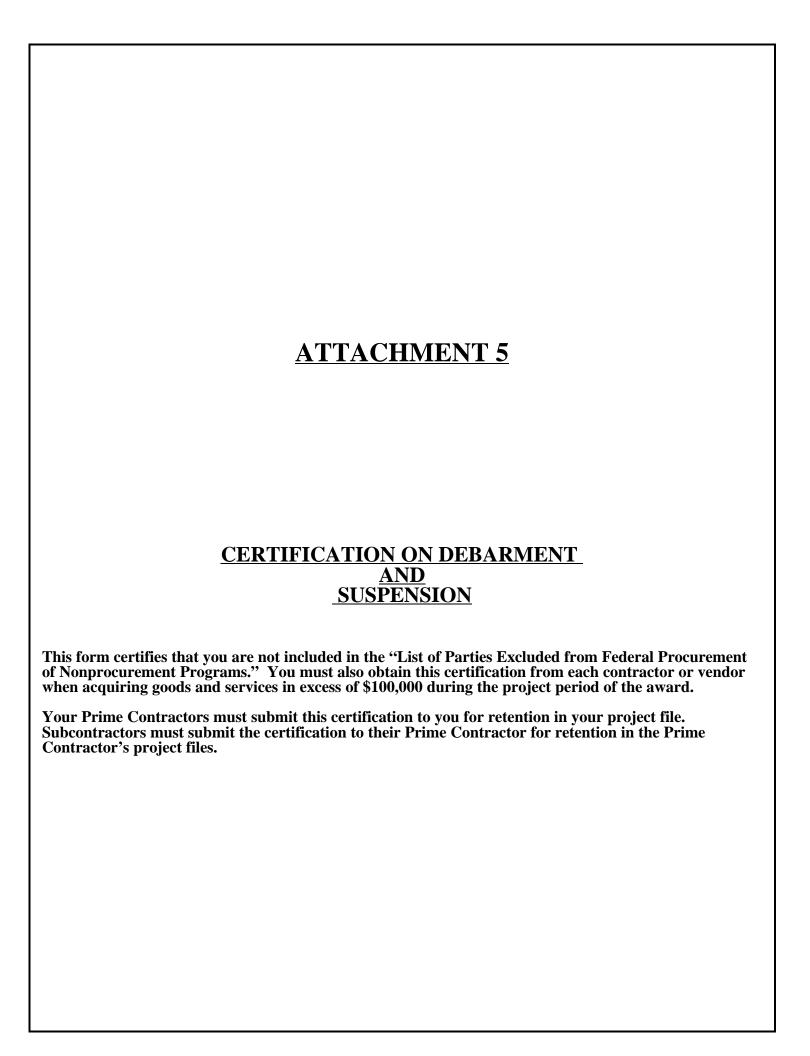
615/266-5781

EAST TENNESSEE Mr. Bob Freeman, Executive Director 5616 Kingston Pike P.O. Box 19806 Knoxville, TN 37939

615/584-8553



QUALITY ASSURANCE PLAN
 This program/project does not involve environmentally related measurements or data generation; therefore, a Quality Assurance Plan is not required pursuant to the above referenced assistance regulations.
 This program/project involves environmentally related measurements or data generation; therefore a Quality Assurance Plan which meets the requirements of:
 40 CFR 30.54 for Universities and Non-Profit Organizations is attached or will be developed before field work begins; or,
 40 CFR 31.45 for State and Local Governments is attached or will be developed before field work begins.
Authorized Representative
Date



# **U.S. Environmental Protection Agency**

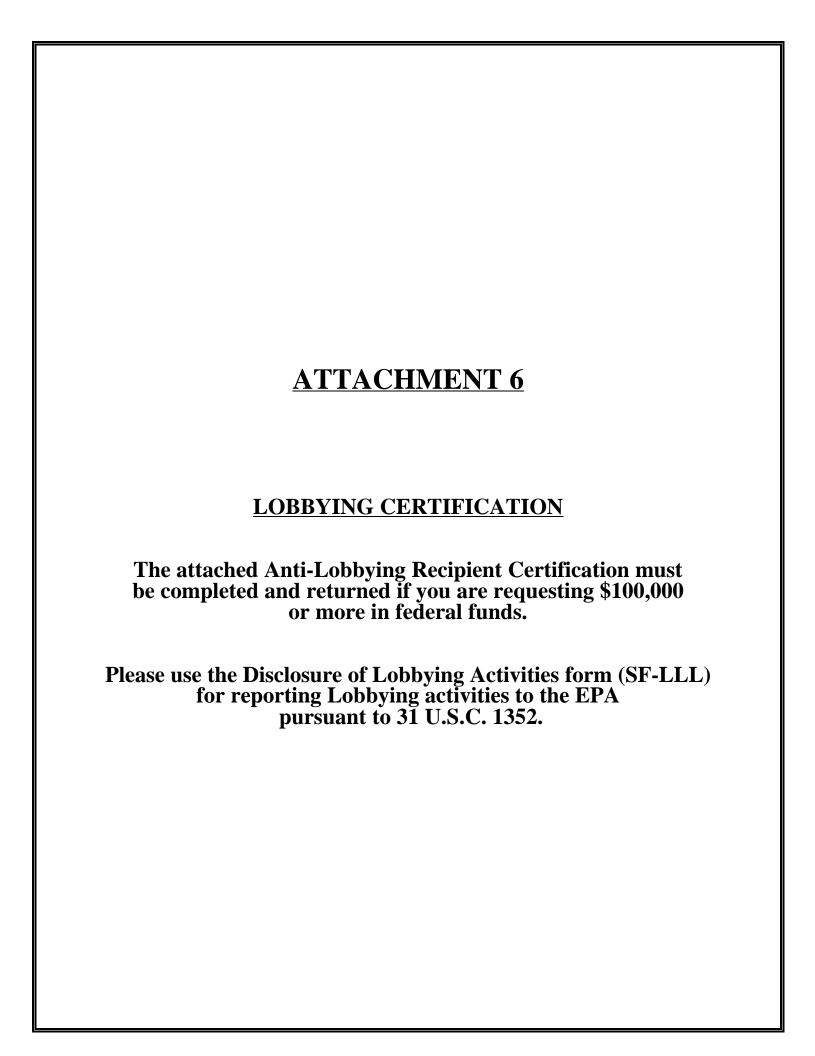
## CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

The prospective participant certifies to the best of its knowledge and belief that it and its principals:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three year period preceding this proposal been convicted of or had a civil judgement rendered against them for commission of fraud or a criminal offense in connection with obtaining. attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement. theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal. State, or ocal) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

I understand that a false statement on this certification may be grounds for rejection of this proposal or termination of the award. In addition, under 18 USC Sec. 1001, a false statement may result in a fine of up to \$10,000 or imprisonment for up to 5 years, or both.

Typed Name & Title of Authorized Representative	
Signature of Authorized Representative	Date
I am unable to certify to the above statements.	My explanation is attached.



## CERTIFICATION REGARDING LOBBYING

## Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

fails to file the required certification shall be subject to a civil penalty of not less than \$ and not more than \$100,000 for each such failure.				
TYPED NAME & TITLE OF AUTHORIZED REPRESENTATIVE				
SIGNATURE OF AUTHORIZED REPRESENTATIVE DATE				
I am unable to certify to the above statements. My explanation is attached.				

# **DISCLOSURE OF LOBBYING ACTIVITIES**

Approved by OMB 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See reverse for public burden disclosure.)

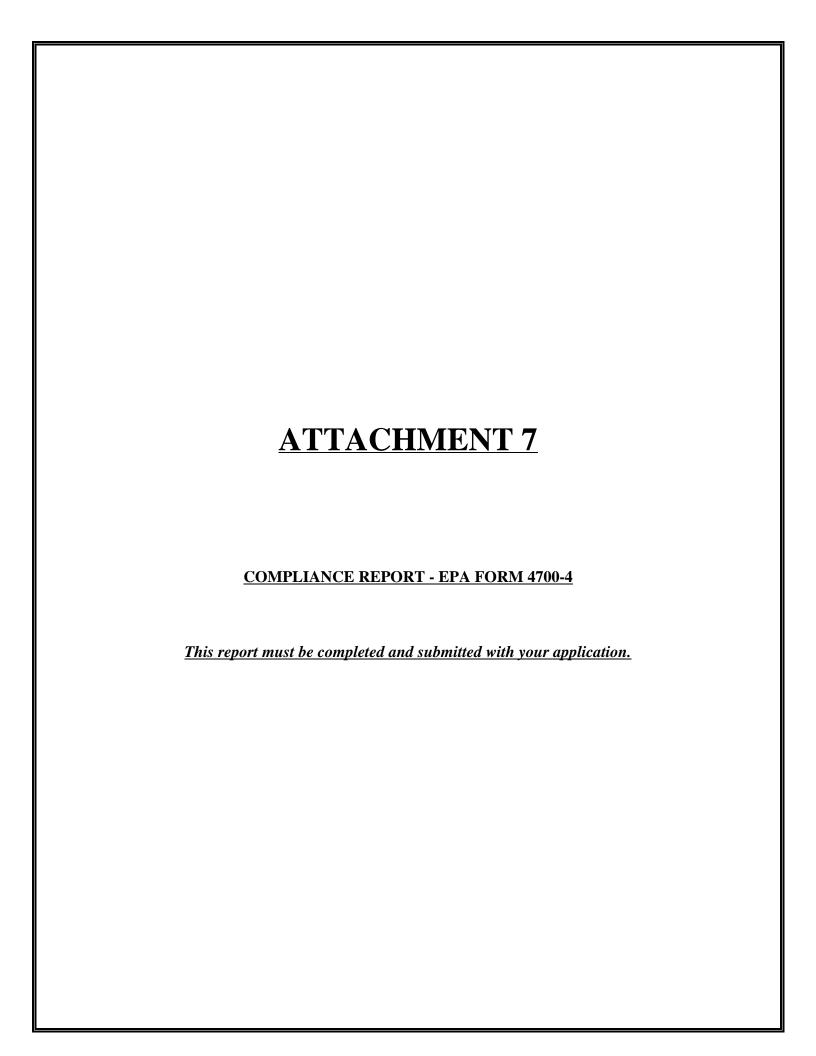
1. Type of Federal Action:  a. contract b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action:  a. bid/offer/application b. initial award c. post-award		3. Report Type:  a. initial filing b. material change  For material Change Only: year quarter date of last report	
4. Name and Address of Reporting Entity:  Subawardee Tier, if known.		5. If Reporting Entity in No. 4 is Subawardee, enter Name and Address of Prime:		
Congressional District, if known:		Congressional District, if known:		
6. Federal Department/Agency:		7. Federal Program Name/Description:  CFDA Number, if applicable:		
8. Federal Action Number, if known:		9. Award Amount, if known: \$		
10. a. Name and Address of Lobbying Registrant (If individual, last name, first name, MI):		b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):		
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.		Signature: Print Name: Title: Telephone No.:Date:		
Federal Use Only:				

#### INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 3152. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or amployee of Congress, or an employee of a member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

- 1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
- 2. Identify the status of the covered Federal action.
- 3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
- 4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
- 5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
- 6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department Transportation, US Coast Guard.
- 7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
- 8. Enter the most appropriate Federal identifying number available for the Federal actin identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
- 9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
- 10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.
  - (b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial (MI).
- 11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.



# **COMPLIANCE REPORT - EPA FORM 4700-4**

# TITLE VI, CIVIL RIGHTS ACT OF 1964

As required by 40 CFR Part 7, all applicants must include a completed EPA Form 4700-4, Pre-award Compliance Review Report, with any/all requests for federal financial assistance. *Grant applications will not be processed if this form is not submitted.* State applicants may submit the form annually with the other required yearly certifications.

All applicants must complete roman numerals I through V. Sections VI through IX must be completed if applicable to the assisted program. If any of the information in Sections VI through IX is not relevant to the project or program for which assistance is requested, please enter "NA" for "Not Applicable." Loan recipients under EPA funded grantee revolving loan programs shall also complete and submit the form to the state agency authorizing the loan. Applicants for the Hardship Grants Program for Rural Communities shall also complete and submit the form to the appropriate State agency.

Any questions relating to these requirements should be directed to the Regional EEO Officer, Rafael Santamaria at 404/562-8312.

United States I Wa Preaward Compliance Revi All Applicants Requesting Federal F	FORM Approved OMB No. 2090-0014 Expires 4-30-99			
Note: Read instructions on reverse side before	completing form.			
I. A. Applicant (Name, City, State)	B. Recipient (Name, City, State)	C. EPA Project No.		
II. Brief description of proposed project, program or activity.				
III. Are any civil rights lawsuits or complaints pen If yes, list those complaints and the disposition	ding against applicant and/or recipient? on of each complaint.	□ Yes □ No		
IV. Have any civil rights compliance reviews of the Federal agency during the two years prior to the assistance?  If yes, list those compliance reviews and state	e applicant and/or recipient been conducted by any his application for activities which would receive EPA us of each review.	□ Yes □ No		
V. Is any other Federal financial assistance being being applied to any portion of this project, pr If yes, list the other Federal Agency(s), descrassistance.	applied for or is any other Federal financial assistance ogram or activity? ribe the associated work and the dollar amount of	□ Yes □ No		
VI. If entire community under the applicant's jurisdiction is not served under the existing facilities/services, or will not be served under the proposed plan, give reasons why.				
VII. Population Characte	eristics	Number of People		
1. A. Population of Entire Service Area		Number of People		
<ol> <li>A. Population of Entire Service Area</li> <li>B. Minority Population of Entire Service Area</li> </ol>		Number of People		
<ol> <li>A. Population of Entire Service Area</li> <li>B. Minority Population of Entire Service Area</li> <li>A. Population Currently Being Served</li> </ol>		Number of People		
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<ol> <li>A. Population of Entire Service Area         <ul> <li>B. Minority Population of Entire Service Area</li> </ul> </li> <li>A. Population Currently Being Served         <ul> <li>B. Minority Population Currently Being Served</li> <li>A. Population to be Served by Project, Progra</li> <li>B. Minority Population to be Served by Project</li> </ul> </li> <li>A. Population to Remain Without Service         <ul> <li>B. Minority Population to Remain Without Set</li> <li>VIII. Will all new facilities or alterations to existing and constructed to be readily accessible to If no, explain how a regulatory exception</li> </ul> </li> <li>IX. Give the schedule for future projects, program provided to all beneficiaries within applicant's within applicant's provided to all beneficiaries within applicant's acknowledge</li> </ol>	ed m or Activity et, Program or Activity  rvice ng facilities financed by these funds be designed and usable by handicapped persons? (40 CFR 7.70) applies.	□ Yes □ No		
<ol> <li>A. Population of Entire Service Area         <ul> <li>B. Minority Population of Entire Service Area</li> <li>A. Population Currently Being Served</li> <li>B. Minority Population Currently Being Served</li> <li>A. Population to be Served by Project, Progra</li> <li>B. Minority Population to be Served by Project</li> </ul> </li> <li>A. Population to Remain Without Service         <ul> <li>B. Minority Population to Remain Without Set</li> </ul> </li> <li>VIII. Will all new facilities or alterations to existin and constructed to be readily accessible to If no, explain how a regulatory exception</li> <li>IX. Give the schedule for future projects, program provided to all beneficiaries within applicant's within applicant's acknowledge that any knowingly false or misleading statem</li> <li>A. Signature of Authorized Official</li> </ol>	ed m or Activity et, Program or Activity  rvice ng facilities financed by these funds be designed and usable by handicapped persons? (40 CFR 7.70) applies.  s or activities (or of future plans), by which services will be s jurisdiction. If there is no schedule, explain why.  is form and all attachments thereto are true, accurate and ent may be punishable by fine or imprisonment or both une B. Title of Authorized Official	□ Yes □ No		
<ol> <li>A. Population of Entire Service Area         <ul> <li>B. Minority Population of Entire Service Area</li> <li>A. Population Currently Being Served</li> <li>B. Minority Population Currently Being Served</li> <li>A. Population to be Served by Project, Progra</li> <li>B. Minority Population to be Served by Project</li> </ul> </li> <li>A. Population to Remain Without Service         <ul> <li>B. Minority Population to Remain Without Set</li> </ul> </li> <li>VIII. Will all new facilities or alterations to existin and constructed to be readily accessible to If no, explain how a regulatory exception</li> <li>IX. Give the schedule for future projects, program provided to all beneficiaries within applicant's within applicant's acknowledge that any knowingly false or misleading statem</li> <li>A. Signature of Authorized Official</li> </ol>	ed m or Activity et, Program or Activity  rvice ng facilities financed by these funds be designed and usable by handicapped persons? (40 CFR 7.70) applies.  s or activities (or of future plans), by which services will be a jurisdiction. If there is no schedule, explain why.	□ Yes □ No		

**ITEMS** 

Recipients of Federal financial assistance from the U.S. Environmental Protection Agency must comply with the following statutes.

Title VI of the Civil Rights Acts of 1964 provides that no person in the United States shall, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance. The Act goes on to explain that the title shall not be construed to authorize action with respect to any employment practice of any employer, employment agency, or labor organization (except where the primary objective of the Federal financial assistance is to provide employment).

Section 13 of the 1972 Amendments to the Federal Water Pollution Control Act provides that no person in the United States shall on the ground of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under the Federal Water Pollution Control Act, as amended. Employment discrimination on the basis of sex is prohibited in all such programs or activities.

Section 504 of The Rehabilitation Act of 1973 provides that no otherwise qualified handicapped individual shall solely by reason of handicap be excluded from participation in, be denied the benefit of, or be subjected to discrimination under any program or activity receiving Federal financial assistance. Employment discrimination on the basis of handicap is prohibited in all such programs or activities.

The Age Discrimination Act of 1975 provides that no person on the basis of age shall be excluded from participation under any program or activity receiving Federal financial assistance. Employment discrimination is not covered. Age discrimination in employment is prohibited by the Age Discrimination in Employment Act administered by the Equal Employment Opportunity Commission.

Title IX of the Education Amendments of 1972 provides that no person on the basis of sex shall be excluded from participation in, be denied the benefit of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance. Employment discrimination on the basis of sex is prohibited in all such education programs or activities. Note: an education program or activity is not limited to only those conducted by a formal institution.

The information on this form is required to enable the U.S. Environmental Protection Agency to determine whether applicants and prospective recipients are developing projects, programs and activities on a nondiscriminatory basis as required by the above statutes.

Submit this form with the original and required copies of applications, requests for extensions, requests for increase of funds, etc. Updates of information are all that are required after the initial application submission.

If any item is not relevant to the project for which assistance is requested, write "NA" for "Not Applicable."

In the event applicant is uncertain about how to answer certain questions, EPA program officials should be contacted for clarification.

EPA FORM 4700-4 (Rev. 1/90) Reverse

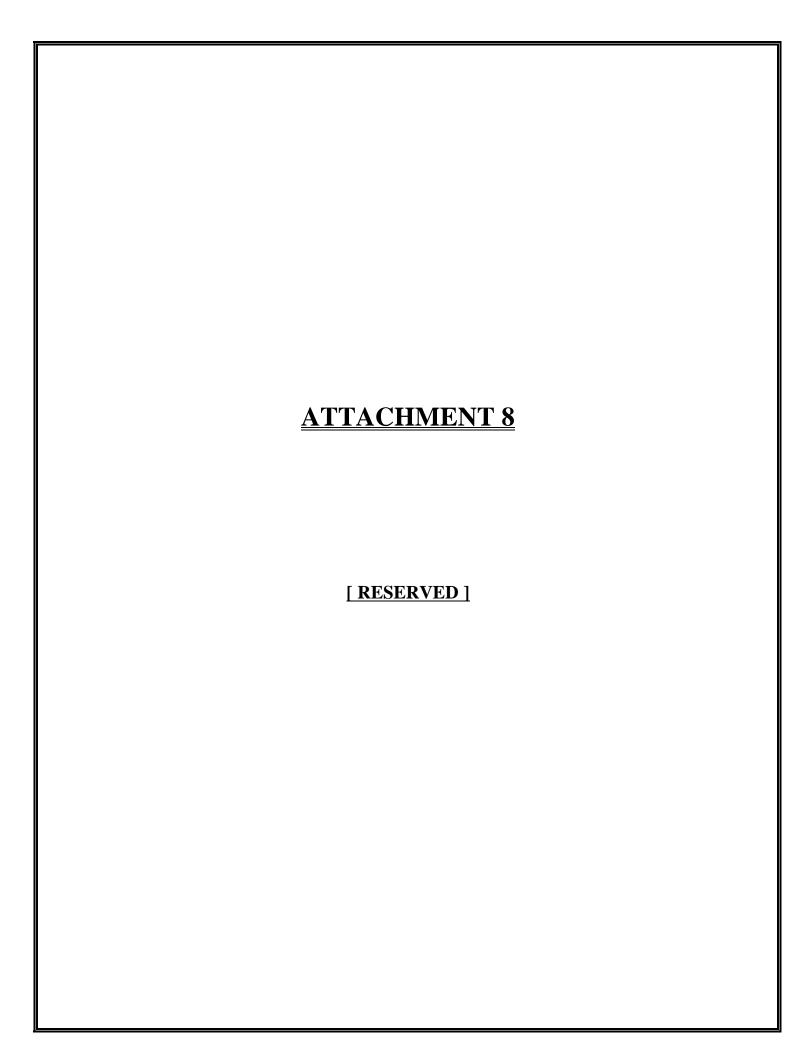
- IA. "Applicant" means any entity that files an application or unsolicited proposal or otherwise requests EPA assistance.
- IB. "Recipient" means any entity, other than applicant, which will actually receive EPA assistance.
- IC. Self-explanatory.
- II. Self-explanatory.
- III. "Civil rights lawsuits" means any lawsuit or complaint alleging discrimination on the basis of race, color, national origin, sex, age, or handicap pending against the applicant and/or entity which actually benefits from the grant. For example, if a city is the named applicant but the grant will actually benefit the Department of Sewage, civil rights lawsuits involving both the city and the Department of Sewage should be listed.
- IV. "Civil rights compliance review" means any review assessing the applicant's and/or recipient's compliance with laws prohibiting discrimination on the basis of race, color, national origin, sex, age, or handicap. If any part of the review covered the entity which will actually benefit from the grant, it should be listed.
- V. Self-explanatory.
- VI. The word "community" refers to the area under the applicant's and/or recipient's jurisdiction. The "community" might be a university or laboratory campus, or a community within a large city. If there is significant disparity between minority and nonminority populations to receive service, not otherwise satisfactorily explained, the Regional office may require a map which indicates the minority and nonminority population served by this project, program or activity.
- VII. This information is required so that reviewers may determine if a disparity in the proposed provision of services will exist in the event the application is approved for funding. Give population of recipient's jurisdiction, broken out by categories as specified.

In the event the applicant cannot provide the requested information because the funds will be distributed over a wide demographic area which is yet to be determined, an explanation may be provided on a separate sheet. For example, a State applying for a capitalization grant under the State Revolving Fund program may not know which cities and counties will apply for, and receive, SRF loans.

- VIII. Self-explanatory.
- IX. "Jurisdiction" means the geographical area over which applicant has the authority to provide service.
- X. Self-explanatory.

### "Burden Disclosure Statement"

EPA estimates public reporting burden for the preparation of this form to average 30 minutes per response. This estimate includes the time for reviewing instructions, gathering and maintaining the data needed and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.



# **ATTACHMENT 9 DISADVANTAGED BUSINESS ENTERPRISE (DBE) DEVELOPMENT PLAN** You must include a fair share objective for the utilization of minority (MBE) and women's (WBE) business enterprises in procurement under EPA assistance agreements. These objectives must be based on negotiations prior to award of any assistance agreement. Please read the attached guidance and contact the DBE coordinator for your state as shown below for further information: Brenda Banks - 404/562-8420 - KY, NC, SC, and TN Dorothy Dimsdale - 404/562-8398 - AL, FL, GA, and MS

# DISADVANTAGED BUSINESS ENTERPRISE FAIR SHARE COMMITMENT

EPA's policy is that recipients of Federal assistance award a fair share of procurement actions to disadvantaged business enterprises (DBEs), including historically black colleges and universities (HBCUs). These fair share objectives must be based on availability of qualified minority businesses enterprises (MBEs) and women's business enterprises (WBEs)to do work in the relevant market for procurement activities for four separate categories, <u>i.e.</u>, construction, equipment, and services. Please indicate below whether you chose to use the State negotiated rates as your fair share objective or to develop your own rates based on availability in your market area. The Region 4 state rates are attached. For rates outside Region 4 or for questions concerning the rates, please call Brenda Banks at 404/562-8420 or Dorothy Dimsdale at 404/562-8398.

		chooses
	(Name of applicant)	
to use the State negotiate	ed rates for procurement activities fund	led by any EPA agreement as follows:
	MBE	WBE
Construction		
Equipment		
Services		
Supplies		
Consolidated goal		
		chooses
	(Name of applicant)	
	y analysis of the relevant market area a procurement activity funded by an assi	<b>1</b> 0
APPLICANT'S CONTA	ACT FOR DBE ISSUES:	
NAME:		
TITLE:	РНО	)NE:

# **REGION 4 MBE/WBE NEGOTIATED RATES**

# **ALABAMA**

Supplies (commodities) 2% MBE and 2.6% WBE Services (contractual) 4% MBE and 4.9% WBE Equipment 3.3% MBE and 3.3% WBE Construction 3.1% MBE and 2.4% WBE

# **FLORIDA**

SRF Construction 11% MBE and 3% WBE

(both SRF)

A & E Services: 10% MBE and 15% WBE Commodities: 7% MBE and 17% WBE Contractual: 14% MBE and 36% WBE Construction: 10% MBE and 11% WBE

(non SRF)

### **GEORGIA**

# **GA DNR**

Construction: 4% MBE and 4% WBE

(includes all SRF)

All Other Categories: 4.75% MBE and 1% WBE

**GA EFA** 

SRF Construction: 4.6% MBE and 2.7% WBE

(Drinking & Clean Water Program)

# **KENTUCKY**

SRF Construction: 3% MBE and 5% WBE

(both programs)

Equipment: 1.5% MBE and 6.4% WBE Services: 4% MBE and 1.8% WBE Supplies:\* 2% MBE and 5% WBE

<sup>\*</sup> As explained elsewhere, this goal applies to only non-State grantees in Kentucky as State recipients are already contractually committed to an exclusive supplier.

# **MISSISSIPPI**

**SRF** Construction

Drinking Water: 2.9% MBE and 0.64% WBE
Clean Water: 5.9% MBE and 1.6% WBE
Equipment: 3.7% MBE and 3.0% WBE
Commodities: 1.1% MBE and 1.8% WBE

(supplies)

Contractual: 1.7% MBE and 2.3% WBE

(services)

# **NORTH CAROLINA**

SRF Construction: 8% MBE and 5% WBE

(both programs)
Agriculture (only)

Supplies: 1.5% MBE and 1.5% WBE Services: 0% MBE and 8.8% WBE Professional Services: 4% MBE and 10% WBE

(statewide)

Goods & Services: 7% MBE and 9% WBE

(includes all equipment, supplies & services)

# **SOUTH CAROLINA**

Construction: 3.6% MBE and 2.4% WBE

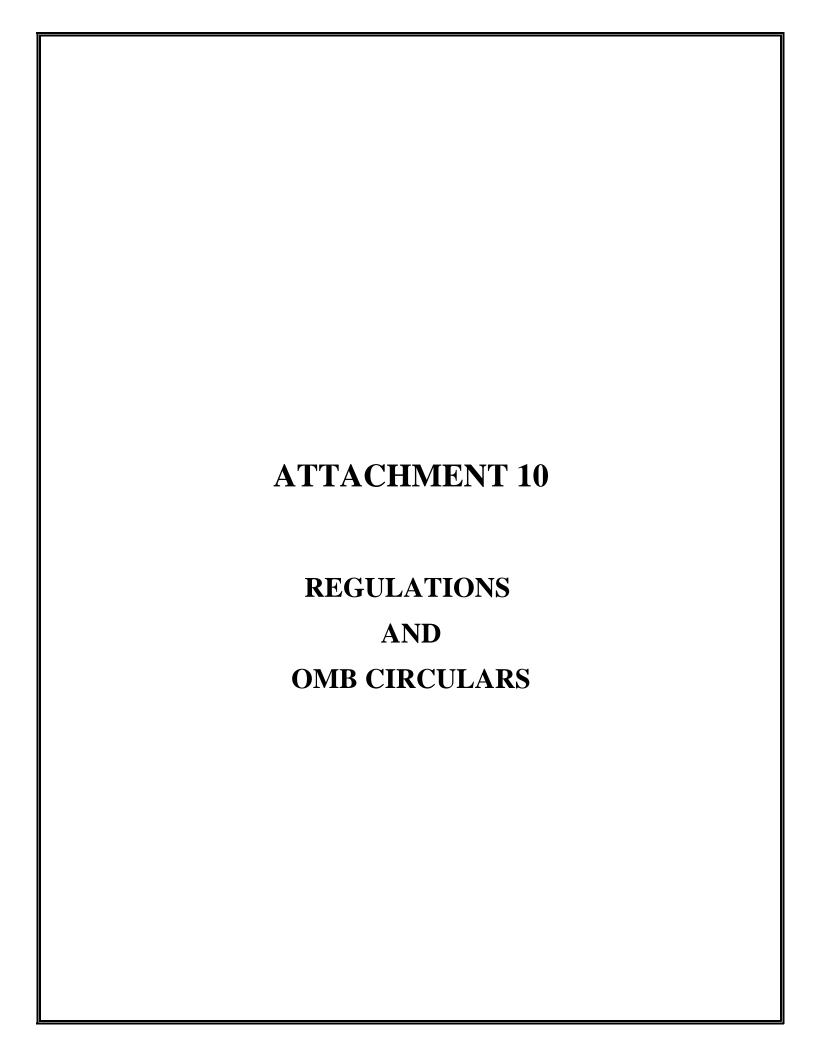
(all SRF)

Services: 11% MBE and 11% WBE Equipment: 10% MBE and 10% WBE Supplies: 9% MBE and 9% WBE UST Services: 0% MBE and 1.44% WBE

# **TENNESSEE**

All Categories: 7% MBE 1% WBE

(includes all SRF)



# REGULATIONS AND OMB CIRCULARS

The general grant regulations and OMB Circulars listed below apply to *all* EPA assistance programs. (NOTE: General Administrative Regulations and Cost Principles *apply by type of organization*, e.g. State Agency, non-profit, etc.) Compliance is a recipient responsibility; accordingly, applicants/recipients should read and follow these documents. EPA will provide assistance, if needed, in interpretation and compliance with these documents. Additional regulations for specific EPA programs (e.g. 40 CFR Parts 35, 39, 45, 47) may also apply to the work for which funding is requested. Contact your EPA program representative or Project Officer for details.

These documents may be accessed electronically at the following Internet address:

http://www.epa.gov/ogd/regs.htm

Hard copies are available upon request. Contact a Grants Specialist for further information.

# **GENERAL GRANT REGULATIONS:**

# 40 CFR -

- PART 7 NON-DISCRIMINATION IN PROGRAMS RECEIVING FEDERAL ASSISTANCE FROM EPA (1990)
- PART 29 INTERGOVERNMENTAL REVIEW OF EPA PROGRAMS AND ACTIVITIES
- PART 30 GRANTS AND AGREEMENTS WITH INSTITUTIONS OF HIGHER EDUCATION, HOSPITALS, AND OTHER NON-PROFIT ORGANIZATIONS (1996)
- PART 31 UNIFORM ADMINISTRATIVE REQUIREMENTS FOR GRANTS AND COOPERATIVE AGREEMENTS TO STATE AND LOCAL GOVERNMENTS (1995)
- PART 32 GOVERNMENT-WIDE DEBARMENT AND SUSPENSION (NON-PROCUREMENT) AND GOVERNMENT-WIDE REQUIREMENTS

FOR DRUG-FREE WORKPLACE; CLEAN AIR ACT AND CLEAN WATER ACT INELIGIBILITY OF FACILITIES IN PERFORMANCE OF FEDERAL CONTRACTS, GRANTS, AND LOANS (1996)

PART 34 - NEW RESTRICTION ON LOBBYING (1995)

# PROGRAM SPECIFIC GRANT REGULATIONS:

# 40 CFR -

PART 35 - STATE AND LOCAL ASSISTANCE (1995)

SUBPART A - CONTINUING ENVIRONMENTAL PROGRAMS

SUBPART C - CONSTRUCTION OF WASTEWATER TREATMENT WORKS

**SUBPART D - REIMBURSEMENT GRANTS** 

SUBPART E - CONSTRUCTION OF TREATMENT WORKS, CWA

SUBPART H - FRESHWATER LAKES

SUBPART I - CONSTRUCTION OF TREATMENT WORKS

SUBPART J - DELEGATION OF CONSTRUCTION GRANTS PROGRAM

SUBPART K - STATE REVOLVING FUNDS, CWA

SUBPART M - SUPERFUND TECHNICAL ASSISTANCE

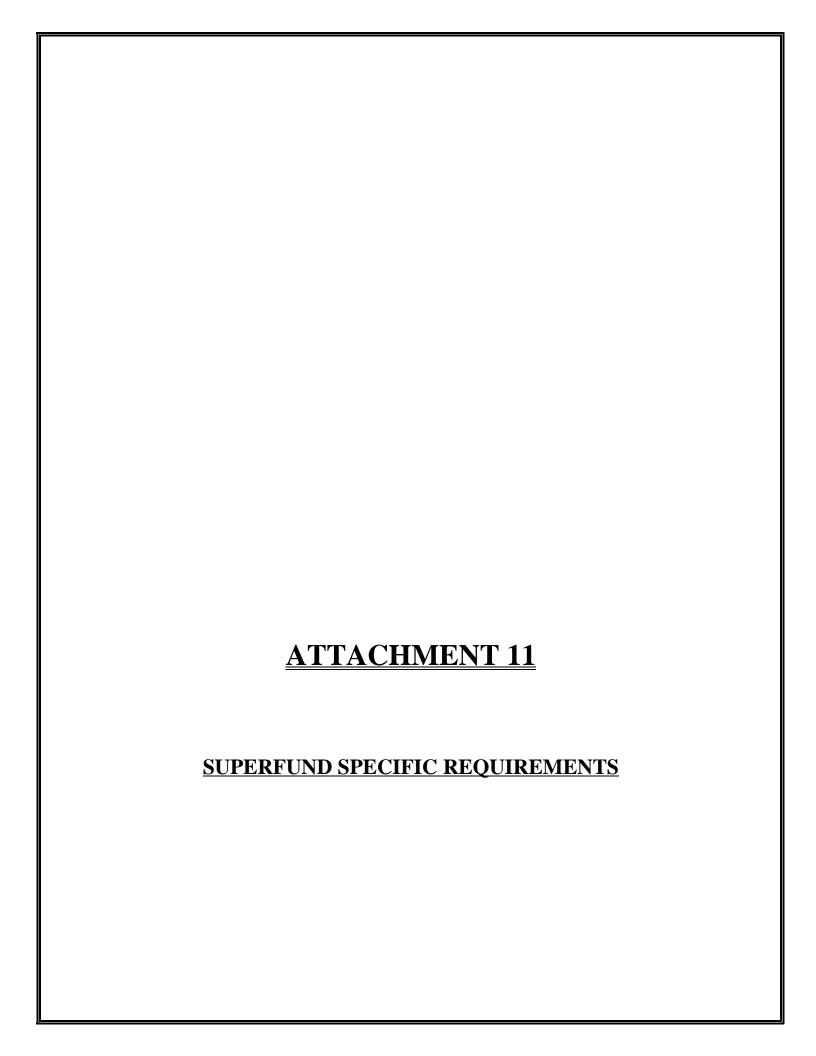
SUBPART O - SUPERFUND RESPONSE ACTIONS

SUBPART P - NATIONAL ESTUARY PROGRAM

- PART 39 LOAN GUARANTEES FOR CONSTRUCTION OF TREATMENT WORKS (1995)
- PART 45 TRAINING ASSISTANCE (1995)
- PART 47 NATIONAL ENVIRONMENTAL EDUCATION ACT GRANTS (1995)

# **OMB CIRCULARS**

- A-21 COST PRINCIPLES FOR EDUCATIONAL INSTITUTIONS
- A-87 COST PRINCIPLES FOR STATE, LOCAL AND TRIBAL GOVERNMENTS
- A-122 COST PRINCIPLES FOR NON-PROFIT ORGANIZATIONS
- A-133 AUDIT REQUIREMENTS ALL APPLICANTS



# SUPERFUND SPECIFIC INFORMATION

# **PROCUREMENT**

Superfund program regulations are found in 40 CFR Part 35, Subpart O, Cooperative agreements and Superfund State Contracts for Superfund Response Actions. These regulations have program specific procurement regulations that all applicants must follow. Included in these requirements is the necessity for the applicant to evaluate its procurement procedures to determine if they meet the intent of Subpart O. After evaluating its system, the applicant or recipient must complete a "Procurement System Certification" and submit the form to EPA. A copy of the form with additional procurement information is attached.

# **EQUIPMENT**

Applicants may include equipment in the application but there are certain requirements that are specific to Superfund agreements. If equipment is included in the proposed budget, you must include documentation that a cost analysis has been conducted to determine the most cost effective method of procuring the item: lease, use of contractor services or purchase with CERCLA funds.

If you plan to purchase equipment with your own funds and charge EPA a user fee, you must submit documentation of the usage rate computation to EPA. The rate must be included in the cooperative agreement before the recipient incurs these equipment costs.

# **CERTIFICATIONS FOR SITE SPECIFIC AWARDS**

If the application is for site specific activities, the following items/assurances must be included or assurance given that these requirements will be satisfied. (40CFR 35.6105)

- (b) Site specific community relations plan and site specific health and safety plan or assurance that site work will not begin until these items are in place.
- (c) CERCLA assurances, as appropriate
- (d) O & M Assurance
- (e) Twenty year waste capacity assurance, if appropriate
- (f) Off site storage, treatment or disposal assurance, if appropriate

(g) Real property assurance, if applicable				

# **EPA PROCUREMENT SYSTEM CERTIFICATION**

APPLICANT'S NAME			
ASSISTANCE APPLICATION NUMBER			
APPLICANT'S ADDRESS			
SECTION I - INSTE			
The applicant must complete and submit a copy of this form with each approcurement system to EPA within the past 2 years and the system has no sign and date the form. If the system has not been certified within the past	olication for EPA Assistance. If the applicant has certified its been substantially revised, complete Part A in Section II, then 2 years, complete Part B, then sign and date the form.		
SECTION I -CERT	FICATION		
A. I affirm that the applicant has within the past 2 years certified to EPA to the system meets the requirements in 40 CFR Part 33. The date of the applicant MONTH/YEAR	hat its procurement system complies with 40 CFR Part 33 and that licant's latest certification is:		
B. Based upon my evaluation of the applicant's procurement system, I, as			
1. CERTIFY that the applicant's procurement system will meet all of procurement action with EPA assistance.	of the requirements of 40 CFR Part 33 before undertaking any		
Please furnish citations to applicable procurement ordinances and regulat	ions:		
2. DO NOT CERTIFY THE APPLICANT'S PROCUREMENT SYSTEM 33, including the procedures in Appendix A, and allow EPA pre	1. The applicant agrees to follow the requirements of 40 CFR Part award review of proposed procurement actions that will use EPA		
assistance.			
TYPED NAME AND Title			
SIGNATURE	DATE		
	DATE		
EPA Form 5700-48 (Rev. 11-90) Previous edition is obsolete.			

# TO BE OR NOT TO BE CERTIFIED

Procurement System Certification →→→→→ Limited EPA Procurement Oversight
Non-Procurement System Certification →→→→→ EPA May Review All Contracts

### **KEY POINTS:**

(a)	Under 40 CFR 35, Subpart O, recipients may use their own
. ,	procurement policies and procedures when conducting procurements for Superfund responses.
	for Superfund responses.

- (b) To certify its system, a recipient must evaluate its own procurement system to determine if the system meets the intent of the requirements of 40 CFR Part 35, Subpart O. After evaluating its procurement system, the applicant or recipient must complete the "Procurement System Certification" (EPA Form 5700-48) and submit the form to EPA with its application. (40 CFR 35.6550(a))
- (c) If the recipient certifies that its procurement system meets the full intent of 40 CFR Part 35, Subpart O, EPA will have limited oversight responsibilities. (40 CFR 35.6550)
- If the recipient's system is not certified, the recipient must follow the requirements set up in 40 CFR Part 35, Subpart O and must allow EPA pre-award review of all proposed procurement actions under the Cooperative Agreement.
- (e) EPA oversight of procurement includes reviewing the recipient's evaluation of a contractor's capability to perform the work for which they were contracted, the recipient's solicitation process, and compliance with procurement requirements, such as using minority-and women-owned business enterprises.
- (f) A recipient must certify its system once every two years, unless the assistance agreement specifies a longer project duration.
- (g) Recipients are encouraged to seek assistance from EPA at all stages of the procurement process. It is particularly important that recipients consult with EPA when a procurement may be controversial. The Region plays an important role in providing this assistance by offering appropriate technical, financial, administrative, or legal experts who can address the issues.

# SUMMARY OF REQUIREMENTS FOR PROCUREMENT UNDER ASSISTANCE AGREEMENTS (40 CFR Part 31 and Part 35, Subpart O)

TITLE	SUMMARY OF REQUIREMENT	<b>SECTION</b>
Procurement Standard	Recipients and contractors must perform in accordance with all applicable requirements.	<b>35.6550</b> 31.36(b)
Competition	Recipients must conduct all procurement transactions in a manner maximum full and open competition.	35.6555 31.36(c)
Master List of Debarred, Suspended and Voluntarily Excluded Persons	, Recipients and their contractors must comply with the requirements providing regarding awards and subawards to debarred and suspended parties.	35.6560 31.35
Procurement Methods	Recipients must comply with all requirements regarding small purchase, sealed bids, competitive proposals, and noncompetitive proposals.	35.6565 31.36(d)
Use of the Same Engineer During Subsequent Phases of the Project	Recipient procedures for using the same engineer for follow-on services must meet procurement requirements.	35.6570
Restrictions on Types on Contracts	Recipients must comply with requirements regarding prohibited contracts, contract used under a removal cooperative agreement, and time and material contracts.	ets 35.6575
Contracting with MBE/WBE, Smal Business and Labor Surplus Firms	Recipients must comply with the six specified steps to ensure these businesses are used whenever possible.	35.6580 31.36(e)
Cost and Price Analysis	Recipients must conduct and document a cost or price analysis in connection with every procurement action.	35.6585 31.36(f)
Bonding and Insurance	Recipients must meet the specified requirements for bonding and insurance.	35.6590 31.36(h)
Contract Provisions	Each contract must be a sound and complete agreement and include the specified provisions.	35.6595 31.36(i)
Contractor Claims	Recipients must conduct an administrative and technical review of each claim and follow other specified requirements.	35.6600
Privity of Contract	Recipients must include a clause in the contract stating that neither EPA nor the United States government shall be party to any contract.	35.6605
Contracts Awarded by a Contractor	Contractors must comply with the specified provisions in the award of a subcontraincluding MBE, WBE, cost principles, specifications, responsibilities, etc.	ct, 35.6610 31.37